

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-375)							SERIAL NO. <b>09/582863</b>	FILING DATE					
							APPLICANT						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				61						
2	/		/				62						
3	/		/				63						
4	/		/				64						
5	/		/				65						
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50													
TOTAL IND.	4		4				TOTAL IND.					3	
TOTAL DEP.	19		15				TOTAL DEP.					41	
TOTAL CLAIMS	21		19				TOTAL CLAIMS					44	

PTO-1350 (2-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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